

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>LS</i>		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	MA	IC640	10/25/00
RESPONSE FORMALITY REVIEW	JK	835	09/01/00 12/05/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	0
19	✓
20	0
21	0
22	0
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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